Entry Blank	—Please Type or Print
Ms./Artist Mr./Artist	SANDRA AMITAY (last name las
Permanent Address	526 RELLIM DR. Street. 44240 City
Zip	OH10 Daytime Tel. (216) 678-884
Temporary or Studio Address	Street City
	Daytime Tel. (
Zip	area
Collaborator (if a If May Show en Artist will pio Museum sho	tries are not accepted or are not sold: k up at Museum.
	Street
City	State Zip
Special Inst	ructions
Entry Blank mu be accepted.	t be completed in full and signed; forms received unsigned will no
When necessar	, include instructions or a drawing for assembling and displaying

an object.

Note carefully the dates for both delivery and return of objects. It is understood that the Museum shall dispose for its own account any objects not picked up by the dates given herein. It is also understood that accepted objects will remain on exhibition until September 5, 1993.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed herein.

I have received the unsold/unaccepted object(s) in good condition.

Signature X Signature

Entry Blanks

Detach entire portion along dotted line and submit with slides, but retain tags

A Specify □ Pain	category: Sculpture Graphics			
Materials used (media		•	1	NDERGLA
COLORS,	LOWFIR	E GL	AZE	
Title WILL				
Price or NFS \$1800	Insurance Value if NFS Only		Size // 10/8 // height x width x depth	
	GRAPHICS AND PH	HOTOGRAPH	Y ONLY	
Additional No. For Sale	Total No. in Edition	Price of Unframe		Price of Frame Only
ACCEPTED	DO NOT WRITE	IN THIS S	ECTION	ACCEPTED
NOT ACCEPTED	2 53	FARE	pp	NOT ACCEPTED
B Specify □ Pain	· ·	culpture iraphics	X Craft □ Phot	ts ography
Materials used (media	DORCE H	Ain L	UNDE	ERGLAZE
COLORS,	*		·	
·Title MUSIC	INTHE	TIME	of w	AR
Price or NFS	Insurance Value If NFS Only		Size 37/8/8" height x width x depth	
	GRAPHICS AND PH	HOTOGRAPH	Y ONLY	
Additional No. For Sale	Total No. in Edition			Price of Frame Only
ACCEPTED NOT ACCEPTED	DO NOT WE IN THIS SECT	RITE 2	S ACCEPT	188

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